

L11000110735

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H110002351763)))



H110002351763ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850) 222-1173
Fax Number : (850) 224-1640

001442.154761

* File Second *
-After Inc. is
filed!

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: Shelfman@wsh-law.com

**FLORIDA LIMITED LIABILITY CO.
COMMERCIAL UNIT 100 LLC**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

RECEIVED
11 SEP 27 PM 2:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Electronic Filing Menu](#)[Corporate Filing Menu](#)[Help](#)

H11000235176 3

COMMERCIAL UNIT 100 INC.

101 N Ocean Drive, Hollywood, Florida 33019



September 22, 2011

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

VIA EMAIL

Re: **Commercial Unit 100 LLC**

Dear Sir or Madam:

This confirms that Commercial Unit 100 Inc., a Florida corporation, consents to and approves the filing of the LLC application with the State of Florida for "**Commercial Unit 100 LLC**".

Should you have any questions, please do not hesitate to contact us.

Sincerely,
Commercial Unit 100 Inc.

By: Arnold Simon
Name: ARNOLD SIMON
Title: PRESIDENT

H11000235176 3

H11000235176 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Commercial Unit 100 LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

101 N Ocean Drive
Hollywood, Florida 33019

Mailing Address:

101 N Ocean Drive
Hollywood, Florida 33019

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Weiss Serota Helfman Pastoriza Cole & Boniske, P.L.

Name

2525 Ponce de Leon Blvd., Suite 700

Florida street address (P.O. Box **NOT** acceptable)

Coral Gables FL 33134

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

X

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

H11000235176 3

FILED
11 SEP 27 AM 9:40
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

H11000235176 3

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR _____

Commercial Unit 100 Inc.

101 N Ocean Drive

Hollywood, Florida 33019

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Arnold Simon

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

H11000235176 3

FILED
11 SEP 27 AM 9:48
TALLAHASSEE, FLORIDA
SECRETARY OF STATE